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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number		10/089,312 (Pat. No. 7,008,791)
	Filing Date		(Int'l) October 2, 2000 (Issued: March 7, 2006)
	First Named Inventor		Gregory GREGORIADIS
	Title	LIPOSOME-ENTRAPPED DNA ORAL VACCINES	
	Art Unit	1633	
	Examiner Name	J. Epps-Ford	
Attorney Docket No.		429022001200	

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number: 25225

OR

☐ Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

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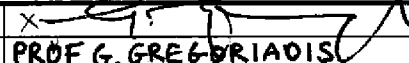
Email

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	X 	Date	X 21/10/08	
Name	PROF. G. GREGORIADIS		Telephone	0644 774105466
Title and Company	CHIEF SCIENTIFIC OFFICER, LIPOX-TECHNOLOGIES LIMITED			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.